SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 95 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDNAX, INC. FEDERAL POLITICAL	e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John Pepia  Mailing Address 20160 Ocean Key Driv  City Boca Raton  FEC ID number of contributing federal political committee.  Name of Employer MEDNAX Services, Inc.  Receipt For: Primary General Other (specify)	State Zip Code FL 33498  C  Occupation VP Accounting & Finance  Aggregate Year-to-Date  800.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3 1 2 0 1 1  Transaction ID: SA11AI.7599  Amount of Each Receipt this Period  400.00
Full Name (Last, First, Middle Initial) Jose A. Perez-Diaz  Mailing Address Pine Grove Cond. Apt. 44-A  City  Isla Verde  FEC ID number of contributing federal political committee.  Name of Employer Pediatrix Medical Group, S.P.  Receipt For: Primary General  Other (specify)	State Zip Code PR 00979  C  Occupation Director of Operations  Aggregate Year-to-Date  650.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 3
Full Name (Last, First, Middle Initial) Curtis Pickert  Mailing Address 4386 Modoc Road  City Santa Barbara  FEC ID number of contributing federal political committee.  Name of Employer Pediatrix Medical Group of CA Receipt For:  Primary General Other (specify)	State Zip Code CA 93110  C  Occupation Medical Director  Aggregate Year-to-Date  2000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		3050.00